Current Issue
Browse Issues
Search
About this Journal
Instruction to Authors
Online Submission
Subscription
Contact Us
RSS Feed

Acta Medica Iranica
2009;47(4) : 55-58

"Time sequential high dose of Cytarabine in acute myelocytic leukemia "

Ghavamzadeh A, Jahani M, Alimoghaddam K, Iravani M, Aghadmi N, Tavassoli P

Abstract:

Given preliminary evidence of timed, sequential chemotherapy of high dose cytosine arabinoside the current study was initiated to assess the side effects and efficacy of this regimen in patients with newly acute myelocytic leukemia (AML). Nineteen adults who referred to Hematology-Oncology and Bone Marrow Transplantation (BMT) research center of Tehran University of Medical Sciences were enrolled in a trial from Aug 1999 to Nov 2000. All patients had a Karnofski classification above 60%. At this time induction therapy consisted of daunorubicin or idarubicin given at a dose of 60 mg/m² and 12 mg/m² IV respectively on days 1-3, and cytarabine (Ara-C) 100 mg/m² intravenously by continuous infusion on days 1-7, followed by Ara-C 1000 mg/m² given on day 8-10 every 12 hours by IV infusion. Consolidation therapy started after 35th day. Of 19 fully evaluable patients, 10 patients achieved a complete remission, whereas 36.6% patients succumbed to death due to regeneration failure. The clinical data show that the overall survival rate from diagnosis 55.5% (95% CI, 30.8-78.5) at 6 months for the entire cohort of the patients. Disease free survival is also 50% (95% CI, 26-74). Mean duration of death due to treatment was 20 days (range 17-29) after beginning the regimen. Presenting WBC counts, French-American-British (FAB) classification, sex and age were not useful prognostic variables. Fever, diarrhea, nausea and vomiting and GI hemorrhage were seen in 19, 6, 4, 7 patients respectively. It seems the 3+7+3 regimen is a promising approach for the AML patients regarding to high complete remission rate, but more supportive care should be considered. Furthermore any, benefit in long-term outcome can't be determined regardless to the choice of post remission therapy (e.g., GCSF, appropriate antibiotics and etc).

Keywords:

Acute myelocytic leukemia ، Antineoplastic protocols ، High dose cytarabine

TUMS ID: 1039

Full Text HTML Full Text PDF 109 KB

top ▲

Home - About - Contact Us